City of Brookhaven Park & Recreation Registration Form



By Mail or Phone By Fax or E-mail In Person Send your completed form to: If you are paying with a credit card, Forms may be delivered to: you can fax the completed form to: Brookhaven Parks & Recreation 404.637.0535 or Lynwood Community Center parksandrec@brookhavenga.gov 8:00am - 5:00pm, M-F 3360 Osborne Road NE then call for payment. Brookhaven, GA 30319 3360 Osborne Road NE All classes, activities and sports registrations are open until deadline or listed capacity. Parent / Guardian Address City State Zip Phone_____(Home) (Work) (Cell) E-Mail Address Emergency Contact Name/Number PLEASE PRINT PARTICIPANT'S INFORMATION Last Name, First Name **Activity Name** M/F AGE DOB Fee Paid **PAYMENT INFORMATION** CREDIT CARD#_____ EXP DATE___/__ NAME ON CARD SIGNATURE SPECIAL NEEDS / ALLERGIES / CONCERNS? Yes or No (explain if yes) **Informed Consent/Participant Release** I, the parent/quardian of the above named participant understand the possibility of injuries resulting from activities indicated above or other activities sponsored by the City of Brookhaven. I hereby acknowledge and accept all risks and hazards incidental to participation in such activities. I hereby release, absolve, indemnify, and hold harmless the City of Brookhaven and its employees and agents from any injury whether to person or property, of the participant resulting from such activities. In case of personal injury to participant, I hereby waive any and all claims against the City of Brookhaven, its employees and agents. I hereby give my permission for the use of participant's name and pictures in any broadcast, telecast, or print media of these activities. SIGNATURE(Parent/Guardian) _____ DATE

For more information call 404.637.0534

Make Checks Pavable to: BPRD